

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

UTILITY PATENT APPLICATION TRANSMITTAL (Only for new nonprovisional applications under 37 CFR 1.53(b))	Attorney Docket No.	20050/0200761-US0
	First Inventor	Satoshi Mizutani
	Title	CUTTER, CUTTING METHOD, APPARATUS FOR PRODUCING INTERLABIAL PAD, AND METHOD FOR PRODUCING THE SAME
	Express Mail Label No.	

APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents.	ADDRESS TO: MS Patent Application Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450
---	---

1. <input type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original, and a duplicate for fee processing)	7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)
2. <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.	8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)
3. <input checked="" type="checkbox"/> Specification [Total Pages 27] (preferred arrangement set forth below) <ul style="list-style-type: none">- Descriptive title of the invention- Cross Reference to Related Applications- Statement Regarding Fed sponsored R & D- Reference to sequence listing, a table, or a computer program listing appendix- Background of the Invention- Brief Summary of the Invention- Brief Description of the Drawings (if filed)- Detailed Description- Claim(s)- Abstract of the Disclosure	a. <input type="checkbox"/> Computer Readable Form (CRF)
4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets 10]	b. Specification Sequence Listing on: i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or ii. <input type="checkbox"/> Paper
5. Oath or Declaration [Total Sheets <input type="checkbox"/> a. <input type="checkbox"/> Newly executed (original or copy) b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) (for continuation/divisional with Box 18 completed) i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).	c. <input type="checkbox"/> Statements verifying identity of above copies
6. <input checked="" type="checkbox"/> Application Data Sheet. See 37 CFR 1.76	

ACCOMPANYING APPLICATION PARTS

- | |
|--|
| 9. <input type="checkbox"/> Assignment Papers (cover sheet & document(s)) |
| 10. <input type="checkbox"/> 37 CFR 3.73(b) Statement [Power of Attorney] |
| 11. <input type="checkbox"/> English Translation Document (if applicable) |
| 12. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 [Copies of IDS Citations] |
| 13. <input checked="" type="checkbox"/> Preliminary Amendment |
| 14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503)
(Should be specifically itemized) |
| 15. <input checked="" type="checkbox"/> Certified Copy of Priority Document(s)
(if foreign priority is claimed) |
| 16. <input type="checkbox"/> Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i).
Applicant must attach form PTO/SB/35 or its equivalent. |
| 17. <input type="checkbox"/> Other: <input type="text"/> |

18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in the first sentence of the specification following the title, or in an Application Data Sheet under 37 CFR 1.76:

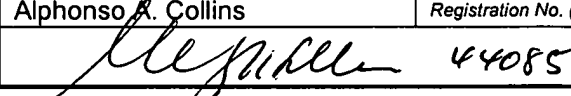
☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application No.: _____

Prior application information: Examiner _____

Art Unit: _____

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.**19. CORRESPONDENCE ADDRESS**☒ Customer Number: **07278** OR ☐ Correspondence address below

Name	DARBY & DARBY P.C. Peter C. Schechter				
Address	P.O. Box 5257				
City	New York	State	NY	Zip Code	10150-5257
Country	US	Telephone	(212) 527-7700	Fax	(212) 753-6237

Name (Print/Type)	Alphonso A. Collins	Registration No. (Attorney/Agent)	43,559
Signature		Date	December 31, 2003

IVARIE GILFILLAN

Application No. (if known):

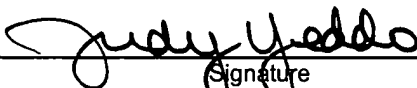
Attorney Docket No.: 20050/0200761-US0

Certificate of Express Mailing Under 37 CFR 1.10

I hereby certify that this correspondence is being deposited with the United States Postal Service as Express Mail, Airbill No. EV 349694249 US in an envelope addressed to:

MS Patent Application
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

on December 31, 2003
Date



Signature

Judy Yeddo

Typed or printed name of person signing Certificate

Note: Each paper must have its own certificate of mailing, or this certificate must identify each submitted paper.

Utility Patent Application Transmittal (1 page)
Application Data Sheet (3 pages)
Specification (22 pages); Claims (4 pages); Abstract (1 page)
Figs. 1-13 (10 sheets)
Claim for Priority and a Certified copy of the Priority document
Preliminary Amendment (7 pages)